Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1.	Agency Name				Date Stamp	California 802	
	City of Glendale, California	1 (##				For Official Use Only	
	Division, Department, or Region (if applicable)					t of Chicle dat Chiy	
	Management Services						
	Designated Agency Contact (Name, Title)						
	Yasmin Beers, City Manager				Amendment (Must Provide Explanation in Part 3.)		
	Area Code/Phone Number	E-mail					
	818-548-4844	YBeers@Glendal	eca.gov		Date of Original Filing:	(month, day, year)	
2.	Function or Event Infor	mation					
	Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 45						
	Event Description: Glendale Dodger Night Date(s) 05						
	Ticket(s)/Pass(es) provided by agency? Yes No I If no:						
	Was ticket distribution made	e at the behest Yes	□ No⊠ I	f yes:	Official's Name (Last, First)		
	of agency official?				Official S 148/1/6 (Last, 1 list)		
	Recipients • Use Section A to identify the agency's department or unit. • Name of Agency, Department or Unit		• Use Section B to Number of Ticket(s)/ Passes	identify an individual. • Use Section C to identify an outside organization. Describe the public purpose made pursuant to the agency's policy			
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes		Identify one of the f		
	Najarian, Ara		1	FPPC 18944	onial Role Other Ding "Ceremonial Role" or "Other" de I.1(C) - Public Purpos visibility and/or profile	e. Promotion of City	
					onial Role Other on "Other" de	_	
	C. Name of Outside O (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made pur	suant to the agency's policy	
4.	Verification I have read and understand FP	PC Regulations 1894	4.1 and 18942.	I have verified to	hat the distribution set fo	orth above, is in accordance	
with the requirements. Yasn			smin Beers		City Manager 5/2/16		
	Signature of Agency Head or Design	ee	Print Name		Title	(month, day, year)	
`	Comment:						

Agency Report of: **Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name Date Stamp California Form City of Glendale, California For Official Use Only Division, Department, or Region (if applicable) **Management Services** Designated Agency Contact (Name, Title) Yasmin Beers, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: 818-548-4844 YBeers@Glendaleca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 45 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Glendale Dodger Night Date(s) __05__/ 10 , Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes 🛛 No 🗌 If no: _ Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ If yes: . Official's Name (Last, First) of agency official? Recipients · Use Section A to identify the agency's department or unit. · Use Section B to identify an individual. · Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy A. of Ticket(s)/ **Passes** Management Services FPPC 18944.1(C) - Public Purpose. Promotion of City 8 recognition, visibility and/or profile on a local scale. Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below. Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes 4. Verification I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance

Yasmin Beers City Manager 552213
Signature of Agency Helid or Designee Print Name Title (month, day, year)
Comment:

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I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. Yasmin Beers City Manager Agency Head or Designee

Comment:

Print Name Title

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Yasmin Beers

City Manager

Signature of Agercy Head or Designee

Print Name

Title

(month. day, year)

Comment.

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California **Form** City of Glendale, California For Official Use Only Division, Department, or Region (if applicable) Management Services Designated Agency Contact (Name, Title) Yasmin Beers, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail **Date of Original Filing:** 818-548-4844 YBeers@Glendaleca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 45 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Glendale Dodger Night Date(s) __05__/_ 10 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If no: _ Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ If yes: _ Official's Name (Last, First) of agency official? Recipients Use Section A to identify the agency's department or unit.
 Use Section B to identify an individual.
 Use Section C to identify an outside organization. Number A. Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes City Attorney Department FPPC 18944.1(C) - Public Purpose. Promotion of City 4 recognition, visibility and/or profile on a local scale. Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other Income ___ If checking "Ceremonial Role" or "Other" describe below Ceremonial Role Other Income ... If checking "Ceremonial Role" or "Other" describe below Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes 4. Verification

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Yasmin Beers

City Manager

Signature of Agency Head or Designee

Print Name

Title

(month, day, year)

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I have mad and understand FI with the requirements.	PPC Regulations 1894	14.1 and 18942. I	have verified that the	distribution set forth above	. is in accordance
with the marinements	5				
with the regularitients.					

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Signat	re of Agency Head or Design	iee

Yasmin Beers
Print Name

City Manager

Title

(month day year)

Comment:

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Signature of Agercy Head or Designee Print Name City Manager

Title (month, day, year)

Comment:

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Yasmin Beers

Signature of Agency Head or Designee

Print Name

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(month, day, year)

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Yasmin Beers
City Manager
Signature of Agency Head or Designee
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Print Name

Signature of Agency Head or Designee

Commen

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Comment:

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	A druk	Voomin Boors	City Manager	Cl11-
	1,00	Yasmin Beers	City Manager	5(22)19
	Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
	Comment:			